## State of Illinois Department of Children and Family Services

## Annual Report for Illinois Licensed Adoption Agencies

	Date: <u>S/10/22</u>				
Name of A	gency: ABC Cou	nseling & Family Service			
Corporate A	Address*: <u>705 B.</u>	Lincoln, Suite 303			
		I, IL 61761			
Illinois DCFS License/Provider ID number: 198405-11			Telephone; 309 451-9495		
License Ef	fective date:	4/13/19	to	4/13/23	
				ate to the agency's most recent fiscal riod for this report:7/1/21-6/30/22	
	ency operates sa of all other offic		ces, please attac	th a separate sheet listing complete	
Department each licens filed annual to provide suspension	t of Children and led agency that m lly, no later than the annual repo	Family Services and valuations a website shal the 45th day following ort or disclose certain license for a period	vith the Illinois A I provide this rep an adoption age information requ	services and shall be filed with the attorney General's Office. In addition, nort on its website. The report shall be ney's license anniversary date. Pailure aired in the report may result in the absequent violations may result in a	
	t applies only to ersion services.	the provision of adop	tion services an	d includes agencies providing foster	
and home conversion	study services-c adoptions. Age	nly programs. Quest	ion number I (A tion services only	nnal agency-assisted adoption services, A-M) does not pertain to foster care y through foster care conversions must	
as requeste		ving questions with a ye	es of no answer o	on the left and provide additional detail	
Yes 1.	Non-identifyin	g information for the pa	ast year concerni	ng adoption is attached:	
	A. The nu	ncy-Assisted Adoption Index of adoptive famil Index of adoptive famil		omitted an agency application but who	
		mber of adoptive famil e agency's fiscal year e		nsed and awaiting domestic placement	
		mber of biological paring period for domestic		gency provided services to during the	
	Adopti	mber of children placed ve parents/families who ve parents/families who	are Illinois Resi	dents: O	

	. Е.	The number of adoptions initiated during the year: Adoptive parents/families who are Illinois Residents: Adoptive parents/families who are non-Illinois Residents:					
	F,	The number of adoptions finalized during the year: Adoptive parents/families who are Illinois Residents: Adoptive parents/families who are non-Illinois Residents:					
	G. Th	G. The number of adoptive placement disruptions:0_  H. The number of domestic adoption dissolutions this year:0_  International Adoptions (either by direct placements/referrals, or through home-study-services-only)					
	H. Th						
	Check	k the boxes that apply to the intercountry adoption services the agency provides:					
		Child referral/matching placement services;					
		Adoption home study/post placement services (utilized by families who are					
		working with another agency for their referral/match);					
		None.					
		number of adoptive families who have submitted an agency application but who are not pproved or licensed;					
		number of adoptive families who are licensed or approved and awaiting international ment:i					
	The r	number of international adoptive placements made during the year:0_					
	List t	the countries with which you have accredited international adoption programs:					
	บ/ล						
		number of international adoptions finalized this year in the U.S., specifying the countries igin: 0					
		number of finalizations in other countries, specifying the countries of origin:					
1							
	The	number of international adoptive placement disruptions:0_					
10 2	. Has	Has the agency:					
	• 1	<ul> <li>lost the right to provide adoption services in any state or country,</li> </ul>					
		had its license suspended for cause, or					
	1	was the agency the subject of other sanctions by any court, governmental agency, or governmental regulatory body relating to the provision of adoption services?  e answer to any portion of this question is yes, attach a full and complete statement of					
	புப	e answer to any partion of this question is yes, attach a fun and complete statement of					

explanation.

no 3,	During the past year, were any actions related to licensure initiated against the agency by a licensing or accrediting body?  If the answer is yes, attach a complete statement of explanation.						
<u>so</u> 4.	During the past year, has the agency been a named party in any civil court actions in relation to the provision of foster care or adoption services?  If the answer is yes, attach a complete statement of explanation.						
no 5.	Is the agency currently the subject of a pending investigation by federal or state authorities? If the answer is yes, attach a complete statement of explanation.						
no 6.	Were there any criminal charges, child abuse charges, malpractice complaints, or lawsuits related to the provision of adoption services against the agency or any of its employees, officers, or directors during the past year?  If the answer is yes, attach a complete statement of explanation and the basis or disposition of the actions.						
ло 7.	Was the agency found hable for any civil or administrative violation or found guilty of or pled guilty to any criminal or administrative violation that relates to the provision of adoption services under federal, state or foreign law?  If the answer is yes, attach a complete statement of explanation.						
110 8.	Was any employee, officer or director of the agency found guilty of any crime or determined to have violated a civil law or administrative rule relating to the provision of adoption services under federal, state or foreign law?  If the answer is yes, attach a complete statement of explanation.						
<u>no</u> 9.	Was any civil or administrative proceeding relating to adoption services instituted by the agency during the year (excluding uncontested adoption proceedings and proceedings filed pursuant to Section 12a of the Adoption Act)?  If the answer is yes, attach a complete statement of explanation.						
_x_ 10	The agency's website address is: www.abccounscling.org						
<u>yes</u> 11	An audited financial statement for the prior fiscal year, including a general description of fces, wages, salaries and other compensation described in Rule 401.565(a), certified by an independent public accountant, is attached.						
yes 12	. This Annual Report with attachments and audited financial statement, certified by an independent public accountant, has been posted on the website listed in item 9.						
<u>yes</u> 13	. Bffective August 15, 2005, Annual Reports are available upon request.						
	n contained in this report is subject to the applicable confidentiality requirements of the Child nd the Adoption Act.						
I certify th	at the above statements are true and accurate, based on information available to me at this time.						
	typed name of Executive Director  a. A. Mithel  5/10/2022						
Signature	of Executive Director Date						

Mailing Instructions on the back

This report is to be mailed to the child welfare agency's A&I licensing Unit and the Illinois Attorney General's Office:

Illinois Attorney General Charitable Trust Bureau 100 W. Randolph Street, 11<sup>th</sup> Floor Chicago, IL 60601 312-814-2595 or 312-814-3000

DCFS Agency and Intuitional Licensing Units:

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Luu.	N.	COUNTRY	,

A&I Licensing Unit A&I Licensing Supervisor 1911 S. Indiana Ave. – 9th Fl. Chicago, IL 60616

## Northern Region

A&I Licensing Unit A&I Licensing Supervisor 1619 W. Jefferson Street Joliet, IL 60435

## Central / Southern Region

A&I Licensing Unit A&I Licensing Supervisor 1124 N. Walnut Springfield, IL 62702